MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) SERIAL NO. FILING DATE APPLICANT(S) 09/926600 CLAIMS AS FILED AFTER 1st AMENDMENT AFTER 2nd AMENDMENT IND. IND. DEP. The second of th IND. DEP. IND. DEP. IND. 2. DEP. IND DEP. .7 :9 :0 10-10-10 TAL TOTAL TOTAL 2.5 TOTAL MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS U.S. DEPARTMENT OF COMMERCE Company of the state of the sta